

INTRAPSYCHIC FACTORS IN STAFF SELECTION AT THE COTSWOLD COMMUNITY

Olya Khaleelee and Patrick Tomlinson

Therapeutic Communities (1997), Vol 18 No. 4 © The Authors

ABSTRACT: The authors examine how a psychodynamic assessment method has been used in a residential therapeutic community for staff selection and development. The assessment method, which includes the Defence Mechanisms Test and an in-depth interview, is used to develop a personality profile clarifying defence mechanisms for each staff applicant. Using a sample of 40 staff, the authors carried out a detailed analysis of the correlations between the staff assessment results and length of stay at the Community.

The analysis shows how hypotheses can be formulated that give accurate predictions about the likely length of stay for individual staff and also some of the difficulties they may experience in various professional roles. The paper explains some of the complexities involved in staff selection for such demanding work and shows how an understanding of the intrapsychic factors involved can greatly aid the process, leading to improvements in staff selection, development, and turnover.

In this paper, the authors demonstrate how a careful examination of the fit between the personalities of staff and the demands on staff in their roles at the Cotswold Community, a therapeutic community for disturbed boys, enables predictions to be made about the length of stay of staff. The study discussed below was developed from a pilot study initiated by the management of the Cotswold Community following a period of concern about high staff turnover during the late 1980s. The pilot study aimed to better understand what attracted staff to the Community, why they left, and whether they brought particular personality characteristics to their work. One of the present writers was brought in with a colleague to carry out this project. The results are documented by Khaleelee (1994) and indicate that accurate predictions of the length of stay of staff could be made based on an assessment process, using the Defence Mechanism Test together with an in-depth interview. The assessment generated some useful additional information about the fit between the candidate and the role, which aided the process of staff selection. It also often provided the staff being assessed with valuable information about themselves, indicating personality strengths and limitations, potential concerning different roles, patterns in personal development, and so forth.

Olya Khaleelee has continued to work with the Community over the intervening years, and she and Patrick Tomlinson, Head of Training and Development at the Community, have assessed over 40 staff during this period. The assessments have taken place either as part of staff selection, for developmental purposes during employment, or on leaving the Community. This process has also led to changes and improvements in many aspects of the Community's selection procedure. During each of the last 3 years, an average of 20-30% of staff have left. This is an improvement on the average of 40%-45% who left in the previous three years. Consequently, the average length of stay is now longer than the preferred 3-year period.

The Cotswold Community

The Cotswold Community is a residential therapeutic community that provides care, treatment, and education for emotionally deprived boys. There are 40 boys at the Community living in four household groups of 10. Six group living workers, two teachers, and two domestic assistants work with each group. This work takes place within the larger context of the Community with its support structures, services, and a working farm.

The treatment approach is largely based on Dockar-Drysdale's (1990, 1993) application of Winnicott's theory. The management and organisation of the Community are based upon a systems approach developed in conjunction with consultants from the Tavistock Institute (Miller, 1992).

The boys placed at the Community have all suffered extreme levels of deprivation and abuse, often beginning from birth. Before their arrival, this deprivation had not been successfully treated, and the task of the Community is to rectify this by filling the gaps, enabling the boys' development to recover. For this to happen, each boy has to return to the 'point of failure' and have needs met that are normally associated with early infancy. This involves 'regression' reached in a trusting relationship or environment. As the boys have so often experienced being severely let down, they will not easily allow themselves to be dependent on anyone and experience the vulnerability that goes with that. To trust someone enough for this to happen, they need to test the staff's and Community's capacity to survive their most destructive impulses.

The fear of being let down is so great that a boy's only way of being sure it will not happen is to try and make it happen. This process of testing often involves very rejecting, aggressive, spoiling, and denigrating behaviour. Once this period has been worked through and survived, the dependency involved in the treatment often mirrors the 'normal' dynamics of infancy, which in itself is testing as well as potentially rewarding work. At the Community, this work takes place in a group setting, which is also a demanding environment, although if the dynamics within the group can be successfully worked with, there is great therapeutic potential.

This description of the treatment context gives some indication of the demands made upon the staff who are working directly with the boys. Surviving and maintaining effective work requires a high level of staff support and individual qualities in each staff member. From a treatment point of view, skilled work as well as consistency and continuity are required. High staff turnover can have a very negative effect on the treatment of individual boys and groups. If there are too many people coming and going, a boy's sense of being in an unreliable environment that cannot survive him is soon confirmed. A boy's treatment in a primary household generally takes between 2 % - 3 % years. Thereafter, he either moves to a 'secondary' household for a further stage of treatment or he leaves the Community. The Community requires a commitment of at least 3 years of work from staff to see boys through each stage of their treatment.

Low levels of staff turnover are therefore important for the Community to achieve its treatment aims. A further factor is the cost of high turnover through the investment in the

recruitment process, training, and the substantial experience needed before a new staff member becomes an asset to the Community. So while issues such as staff support and the organisation of work are seen to have a considerable influence on staff turnover, staff recruitment and selection are also of central importance.

The selection process: theory and practice

The selection of staff to work with emotionally disturbed and deprived children is a difficult and complex task. The work specifically requires staff to use their most inner resources, both consciously and unconsciously. This is similar to how Winnicott (1956) describes a mother being unconsciously identified with the needs of her infant, through her own internalised experience of maternal provision. Winnicott argues that this unconscious identification helps the mother to respond appropriately to her infant's needs. He also describes how difficulties in the mother's own experience of infancy, of which she is unconscious, may cause a conflict for her when represented with similar situations by her infants. This conflict may then complicate her response. Scenarios similar to these are created time and time again in the residential treatment of emotionally disturbed children. For example, a deprived child may have a real need to be 'messy' in a way that an infant can be 'messy' and to have this mess cared for or 'contained'. If the child's carer's own childhood experiences were of overly controlling parents, perhaps not allowing him to be messy, then the carer may have difficulty in responding to the child's needs in this area. She may feel envious of the child if she allows him to be messy, or feelings of anger towards her parents may be aroused by the situation. The degree to which the carer can respond to the child's needs will largely depend upon the capacity to recognise feelings that are connected to past experiences and to distinguish them from the present situation.

Bettelheim (1974) vividly described how living through difficulties like this with disturbed children gradually has an impact on the staff's defences. He claimed that the pressures can lead to a temporary breakdown of the staff's defences before they develop new defences through insight and realisation, which are more adaptable to the new situation in which they find themselves. He calls this process 're-integration'.

From the point of view of staff selection, how does the selector assess an applicant's underlying defences and the impact on those defences when working with emotionally disturbed children over a long period?

Attempting to make such an assessment is a very difficult task in itself. The underlying issues that will be the most important in the long term are often not easy to detect in meeting someone for a short period and in a relatively less demanding situation, such as an interview. For example, the personality trait of 'laughing in the face of adversity', being cheerful and enthusiastic in difficult circumstances - can be used defensively to deny more anxious and difficult feelings. This defence may seem quite convincing in an interview or informal meeting, but when tested intensely over time may break down, possibly revealing a much more vulnerable person. Such a 'breakdown' of defences may be healthy and useful in terms of the work. However, its usefulness will depend on the extent to which the individual can carry on functioning effectively - the individual's level of inner resilience - which in turn will be helped or hindered by the level of staff support offered by the organisation.

Another aspect of personality that is difficult to assess is how a person manages feelings of aggression. For example, how would a selector know if someone maintained the appearance of being friendly and cooperative by turning more aggressive feelings inwards, rather than risk expressing them towards others? This defence may develop in early childhood as a response to a sense that one's parents are easily overwhelmed by aggressive feelings. A child may then turn these feelings inwards to protect the parents and to maintain the appearance of a happy or non-aggressive child, which is more tolerable for the parents. In some cases, parents may unconsciously indicate a preference for a sick or withdrawn child rather than one with aggressive feelings. So if turning these feelings inwards helps the child to be cared for by his parents, the defence is further reinforced. Staff selection for work with disturbed children is particularly vulnerable to the seductive nature of this defence. The very nature of the work involves working with the full force of primitive aggression. Inevitably, feelings of aggression are aroused in the staff, which can be quite difficult to acknowledge and work with. The response of introaggression may lead to depression, withdrawal, and psychosomatic illness.

A potential new staff member who tends to please others with a denial of more difficult, aggressive feelings may feel like a breath of fresh air. The staff may have unrealistic hopes about the difference such a new person may make.

Given these complexities, many variables need to be taken into account when selecting staff for the difficult work at the Community. We describe below the current selection process, which has been developed at the Community, a summary of the research following up on the original pilot study, and finally, some case examples.

The selection process

The selection process includes a letter from the applicant describing herself, together with a completed application form; a one-day informal visit; a three-day visit; opportunities to be involved in the workplace; meetings and interviews with senior staff; informal discussions with staff in general; and written exercises related to the visits. The next stage is for the applicant to have a formal psychological assessment, which includes an in-depth interview about personal development and uses, amongst other instruments, the Defence Mechanism Test (DMT). A confidential assessment report is taken into consideration by the Principal along with other data as part of the selection process. A copy of the report and feedback is made available to the applicant. Beyond this, confidentiality is maintained.

The Defence Mechanism Test (DMT)

The DMT was developed by Kragh (1955) at the University of Lund as a predictor of resilience in the face of stress. Many follow-up studies have taken place (Olff et al., 1991) with workers in different industries who have to manage stress during their work. While Kragh initially applied the DMT successfully to the selection of fighter pilots, it was subsequently used for selecting others in dangerous occupations such as trainee and qualified air traffic controllers (Svensson and Trygg, 1991), divers (Kragh, 1962), commercial and fighter pilots (Neuman, 1971; Torjussen and Vaernes, 1991). It has been used in the assessment of subjective fear in training for parachute jumping (Vaernes, 1982) and research

on the assessment of serious drinking and driving offenders (Saitner, 1991). More recently, it has been successfully used in senior management selection and development (Khaleelee and Woolf, 1996).

The DMT is based on an examination of the perceptual process using a tachistoscope. The applicant is shown a series of 18-20 exposures of a stimulus picture with a peripheral threat at gradually increasing levels of illumination. From the verbal and visual material produced by the applicant, a profile is developed which indicates how the defence mechanisms, mobilised by the ego to cope with the anxiety generated in stressful situations, have impinged on the individual's emotional development. The DMT identifies at what stages in an individual's development the defences emerge. The defence mechanisms include those that Freud (1926) described:

- isolation
- denial
- repression
- reaction formation
- projection
- introjection
- regression
- and introaggression or turning against the self.

The defence mechanisms act as the unconscious shock absorbers of the mind, preventing excessive stimulation either from the inner world or from the external world and thereby protecting the individual from anxiety.

Our research was carried out on several people assessed at the Cotswold Community between 1989-96. Assessments have been carried out for three different purposes:

1. Staff recruitment and selection
2. Staff development
3. Staff exit assessments

For the sake of economy, we refer to applicants and staff in these categories as 'candidates'.

Every member of staff who has been assessed during this period is included if they satisfy one of two criteria:

1. If they have left within the first two years of employment.
2. If they have remained in employment for 3 years or more.

Those leaving within 2 years are classified as 'leavers' and those staying for three years or more, as 'stayers'. Those assessed consist of 22 stayers and 14 leavers. Data concerning the six staff who remained at the Community for between 2 and 3 years is not included in the analysis because our interest is in shorter and longer periods of stay. Similarly, the 3 staff who are presently working at the community in their 3rd year are not included. However, the data from their assessments is included for interest in Appendix 2.

Analysis of DMT profiles

Each candidate was assessed and tested to ascertain which defence mechanisms were used to protect the self from stress. These were analysed as integrative (sometimes called autoplasic) and assertive (sometimes called alloplastic). These terms - autoplasic and alloplastic - distinguish between two kinds of adaptation at an early stage of development, one directed towards the subject, the other directed towards the outside world, both of which allow the ego to maintain its equilibrium (Laplanche and Pontalis, 1973). For example, with introaggression, the direction of the defence is against the subject, and equilibrium is maintained by the subject absorbing the feeling and taking it inside. This is an autoplasic response. With reaction formation, the subject converts a threatening reality in the environment into its opposite; the experience is a form of denial actively asserted concerning the environment. This is an alloplastic response. In each instance, the subject controls the threat in a different way.

These categories are, in turn, made up of various types of defence mechanisms such as repression, isolation, reaction formation, and so on. Some defences mobilised in different ways can be common to both types of adaptation. Each defence is scored according to when it appears on the candidate's profile and for how long the defence remains in place. This provides hypotheses about the age at which a defence was mobilised, which can be discussed concerning the individual's life history. It is then possible to score a candidate's defence with an overall score, with an assertive and integrative score, and with scores of specific defences within the assertive and integrative bands. Our theories about the likelihood that individuals will be able to manage working at the Community suggest connections between these scores and length of service. To examine these connections more fully, the type and level of defence mechanism scores of stayers and leavers were compared in some detail.

Tests of the connections for statistical significance were conducted by using a standard approach - Fisher's Exact Probability Test (Siegel, 1956). The following are the results for both stayers and leavers. We shall indicate where these results are significant.

Total scores

These scores - a quantification of all defence mechanisms used, combining both the candidate's integrative and assertive scores, range from 50 to over 650 and can be separated into 4 bands, giving the number of stayers and leavers in each band. From this, the percentage chance a candidate has of being a stayer in each band can be ascertained.

Total Scores	Stayers	Leavers	% Stayers
50-249	8	3	73
250-449	3	3	50
450-649	9	3	75
650 and over	2	5	28

This pattern of scores is not significant. However, when one separates integrative from the assertive, the following patterns emerge.

Integrative scores

These scores range from 10-630 and can be separated into 3 bands.

Integrative scores	Stayers	Leavers	% Stayers
0-180	16	3	84
181-360	3	5	37
360+	3	6	33

A clear pattern emerges here. Those candidates with scores of 180 or less have the most chance of being stayers, and those with scores over 180 have the least chance ($p < .01$).

Assertive scores

These scores range from 20-420 and can be separated into 3 bands.

Assertive score	Stayers	Leavers	% Stayers
0-140	4	5	44
140-280	12	5	71
281-420	6	4	60

There is no significant difference in the pattern of these scores.

Further analysis of DMT data

Having analysed the total scores, it is possible to analyse the specific defences within the integrative and assertive bands. Each of the two defensive types is made up of different individual defences. For instance, there are the following integrative defences: regression, introaggression, certain aspects of introjection, isolation, and repression. Assertive defences include denial, reaction formation, certain aspects of introjection, isolation, and repression.

A framework is outlined below in which a candidate's defences are correlated with staying or leaving. Some integrative defences have positive and some negative relationships with staying, while there are no assertive defences that have a negative relationship. For example, introaggression has a positive correlation with leaving, and regression has a positive correlation with staying.

If each candidate's integrative defences are scored, scoring positively for defences connected with staying, negatively for those connected with leaving, and neutrally for those which have no influence either way, then each candidate will either have a positive, negative, or neutral score. We now have four types of data: total defence scores, integrative and assertive defence scores, and +/-n scores.

If we consider each candidate's integrative score alongside their +/-n score, the following pattern emerges.

<u>Integrative/+/-n score</u>	<u>Stayers</u>	<u>Leavers</u>	<u>% Stayers</u>
0-180 and (+/n)	14	3	82
0-180 and (-)	2	0	100
Over 180 and (+/n)	6	2	75
Over 180 and (-)	0	9	0

These results are very significant. Where a candidate has a score less than 180, there is a positive correlation with staying regardless of whether these candidates have a (+/n) or (-) score. Where a candidate scores over 180, there is a significant relationship between staying or leaving and a (+/N) or (-) score, $p < .01$.

The drawing of boundaries around the data inevitably involves a degree of bias. However, the key question is whether the positioning of the boundaries makes theoretical sense. As we describe below, given the nature of the work, the stresses involved, and the defences that are most likely to be effective in these situations, we think they do make sense.

Summary of the research results

The analysis provides a clear hypothesis about the probability of a candidate staying or leaving. The most significant correlation is firstly, that the integrative score has the most bearing on staying and leaving. If the integrative score is less than 180, there is a positive correlation with staying. If the score is over 180, the candidate's specific integrative defences need to be assessed in detail. If (-) defences predominate, then leaving is most probable, and if (+/n) predominate, staying is most probable.

Integrative defences are connected to the need for group support rather than the capacity to work things out on one's own. In a particularly demanding and stressful environment where individuals are thrown back more on their personal boundaries, those candidates with high integrative scores may be less resilient as they are more likely to perceive the work group as unsupportive and inconsistent. On the other hand, candidates with low integrative scores may be more able to work things out on their own during times when the work group is under pressure.

When candidates' integrative scores are high, the nature of their defences indicated by the +/-n score is the critical factor in determining whether they are more likely to be stayers or leavers. For example, the defence of introaggression is likely to compound difficulties for candidates with high integrative scores. Not only may such candidates have little capacity to

work things out on their own, but they are also more likely to blame themselves for difficulties being experienced.

In contrast, candidates with the defence of regression may be less self-critical and more tolerant of temporarily feeling overwhelmed. Also, staff who work with emotionally vulnerable children may be more receptive and supportive towards colleagues who respond to stress in this way.

The outcome of the research suggests that individuals who are either heavily defended or who are undefended in certain ways are likely to experience a high level of anxiety in the work. Those who are heavily defended have to use more psychic energy to defend themselves against anxiety, leaving less available for coping with external reality. Those who are undefended are open to intense external and internal pressure and may suffer high levels of anxiety. The greater the pressure, the greater the likelihood that the susceptible individual may gradually feel exhausted, overwhelmed, or 'burnt out', depending on their defensive structure.

Case studies

Annabel applied to work at the Community when she had just finished University at the age of 23. The initial impression was of a friendly, quietly confident, and easy-going person. After the initial interviews and visits, it was decided to employ her as a volunteer for 6 months. This was mainly to test out the possibility of longer-term employment.

At first, Annabel became very popular with virtually all the staff and boys. Before long, different teams were almost in competition to recruit her. She seemed to be thriving in this situation. As part of the selection process, Annabel went through an assessment. Her DMT assessment showed high levels of reaction formation or 'laughing in the face of adversity' and introaggression. Her life history interview seemed to confirm this, with very little sign of acknowledged difficulty in her life or aggression in her family relationships. However, there were several quite serious accidents around significant life changes, and a lot of illness-related fatigue. The accidents seemed to coincide with points of separation, such as starting school and leaving home. It is possible that a person who unconsciously turns aggression inward may actually hurt herself through an accident or illness. Also, considerable psychic energy is used up if difficult feelings have to be held inwards and a cheerful exterior maintained.

In Annabel's case, she began to struggle to maintain her liveliness and enthusiasm after the first 2-3 months of work at the Community. This gradually led to periods of complete exhaustion and minor but persistent illnesses. During this period, Annabel was able to acknowledge more of her difficult feelings connected with the work and became more in touch with her limits. After 6 months, Annabel decided to use the experience she had gained to help her apply for a different job. She felt clearly that the work at the Community was too demanding, though she had found the experience valuable. In her case, there was no disruption to the boys' treatment as she was only employed temporarily and not assigned as a carer for individual boys. If she had been employed on a longer-term basis, the outcome would have been far more disruptive.

On those occasions when a staff member who had not previously been assessed leaves prematurely, we have carried out exit assessments and often found personality profiles similar to Annabel's. Derek was one such example. Derek seemed to be progressing quite well in his work for the first year or so, appearing very even-tempered, understanding, and sensitive to the boys' needs. However, at times in the face of quite provocative, aggressive behaviour, he seemed almost too 'even-tempered'. Gradually, Derek began to struggle much more in his work, becoming increasingly anxious and distressed by this difficulty. He became quite run down, developing some minor physical ailments. It became more worrying when he began to experience dizziness, feeling faint, and fainting on two occasions. A medical examination was inconclusive. Derek made use of the support and supervision available, but after further deterioration, he was signed off long-term sick and left. He was assessed at this stage and his DMT profile indicated introaggression as one of his main defences.

On many occasions, the assessment process has been helpful in revealing issues that have contributed to a positive change for a staff member. Andrew, who was 24 and a university graduate, had been working at the Community for about a year when he began to experience acute levels of anxiety and a sense of feeling overwhelmed. He began to suffer from prolonged bouts of 'the flu'. The impact of this was to generate a sense of unreliability, which created difficulties for the staff, the boys, and Andrew. He began to receive negative feelings from staff and boys, such as 'he's not trying hard enough', or 'he can't be bothered.' This made matters worse for him. It was agreed with Andrew that he should be assessed to help try and clarify the underlying difficulty.

His assessment suggested that he was an extremely intelligent and sensitive but very undefended person. His lack of defences combined with his sensitivity would leave him particularly vulnerable in such a demanding situation, so it was not surprising, given his test results, that he felt overwhelmed. Added to this was Andrew's distress at feeling he was letting everyone down and failing. His previous sense of achievement and positive feelings about himself were getting lost. It was particularly the intense work with individual boys and their emotional dependency on him that he had found overwhelming. It was agreed to employ him differently in a way that would enable him to move around different groups as a relief worker. He found this less intensely demanding and soon recovered to an effective level of functioning. Staff and boys felt very positive about his contribution in this new role. Andrew was relieved to discover there was an explanation for his previous difficulties and to have some of his capacities and attributes reaffirmed. After about a year, he moved on to pursue an academic career.

Terry was assessed during his application to work at the Community. His DMT profile indicated a generally resilient, though sensitive person who seemed suitable for the work at the Community. His underlying motivation, attracting him to this work, appeared to be linked to an unconscious wish to fill some gaps in his early development. The Community chose to employ him, and he soon became an effective team member, working well with boys individually and in groups. In particular, he soon became a very competent deputy manager. However, towards the end of his third year, he began to think about leaving. At this point, his manager suggested he have another interview, following up on his initial assessment, to help clarify the issues for him in thinking about his future.

This interview, along with his DMT profile, indicated that Terry experienced an underlying difficulty concerning authority and leadership. During his childhood, he had always felt himself to be in the shadow of an authority figure. This pattern then repeated itself within his work life. Terry had held several deputy positions and always moved on when the position of manager or leader became a possibility for him. The interview helped Terry become more conscious of this pattern and less unconsciously bound by it. This realisation, alongside the progress he had made in his work and development, helped Terry decide to stay and apply for a Team Manager's position rather than leave. He succeeded in his application and became an effective manager.

These examples illustrate the value of assessing emotional resilience and other underlying factors related to personality and emotional development, as these are likely to surface once the staff member begins to feel the impact of the work.

Experience shows that candidates like Andrew or those who are undefended in certain ways are unlikely to have the emotional resilience necessary to withstand such demanding work. Similarly, candidates with high integrative scores are likely to need a level of support from others that outweighs their capacity to work things out on their own, and the support may not be available when it is needed. At the same time, there may be room for improvement at the margin. There may be some candidates who might either stay or leave depending on the situation. Effective staff support may enable more of them to stay and work effectively rather than leave.

There may also be some candidates who have profiles associated with staying who fail to do so. Some of this may be circumstantial. However, it needs to be recognised that there may also be other issues and variables involved.

For example, the one leaver out of seventeen candidates who had a favourable combination of defences and was predicted to be a stayer was someone who could be considered to be different within the context of the Cotswold Community. Abigail was employed by the Community when she was in her 40s. She was the oldest member of the 25 'group living' staff who had an average age of 30. She was also a foreigner with a non-European culture. Factors such as these must also be taken into consideration alongside the candidate's DMT profile. The stresses and anxieties involved in the work for Abigail will have had a different impact and different implications than for a younger English candidate with a similar profile.

To some extent, this is true for any candidate who exhibits a markedly distinguishing difference. The life history interview, which forms part of the assessment, helps to focus on each candidate's personality and development and their capacity to adapt to the distinctive culture and norms of the Cotswold Community.

However, our data and theoretical understanding are not sufficiently developed to use these boundaries rigidly when selecting staff. In any case, as we say above, other material has to be taken into account in making selection decisions.

Finally, the actual process of participating in an assessment is likely to lead to some changes in outcome. The feedback from the assessment may make a significant difference to the way

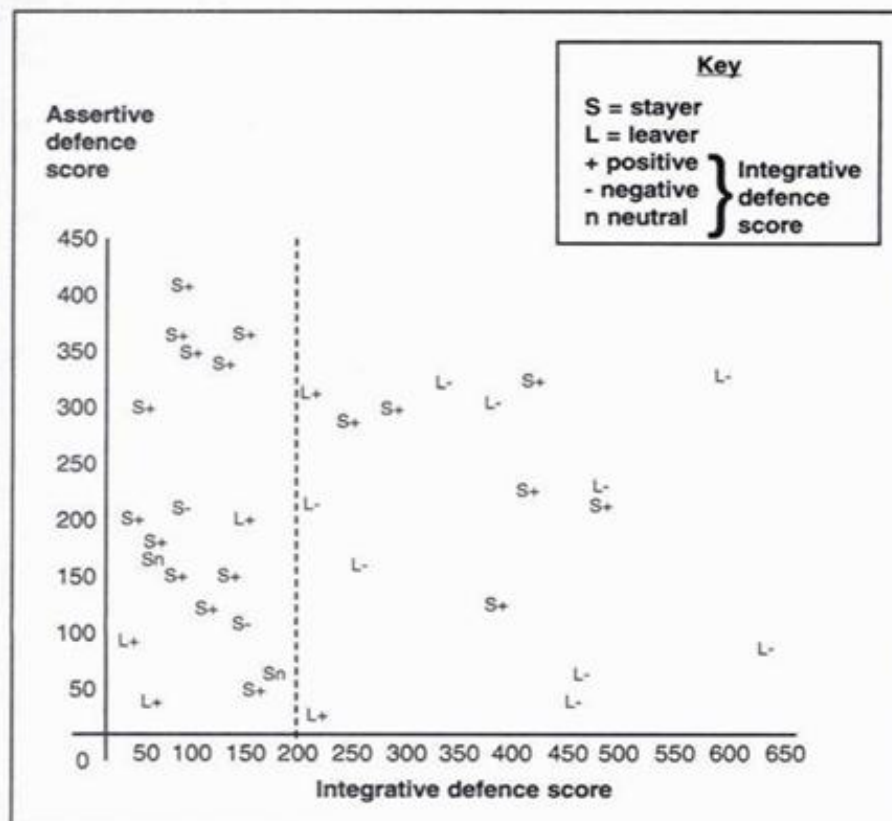
the candidate and the Community respond to issues that arise in the candidate's development once employed. In the case of Andrew, who felt overwhelmed and exhausted, began to be seen as unreliable, his assessment led to a greater understanding both for him and the Community about the difficulties being experienced. This led to a positive change in the role he was allocated so that he regained his competence in the work, leading to a positive shift in the perception of Andrew by the boys and staff with whom he worked.

Concluding remarks

These examples highlight some of the most important issues involved in staff selection. They strongly indicate how rigorous the process of selection needs to be to succeed in selecting staff with the appropriate skills and personal qualities. The thoroughness of the assessment process at the Cotswold Community, together with other innovations related to induction procedures, developmental opportunities, and a greater awareness of unconscious processes at the organisational level, has resulted in a considerable drop in staff turnover and an enhanced capacity to engage in the primary task of the Community. The DMT is a vital part of these improvements, and this paper has demonstrated how the defensive constellations it reveals are associated with length of stay. The overall statistical results for the small number of staff included in this and previous studies are impressive.

However, they also show there is more to be learned about how the detailed defences it reveals are associated with the ability to tolerate work with disturbed children and how the organisation can support staff with less favourable defensive structures to enable them to work more resiliently with these children.

Appendix 1: Total assertive and integrative defence scores



These are the scores for the six candidates who stayed for 2-3 years. Candidate Assertive score Integrative score + - n

1	190	310	+
2	40	150	+
3	40	110	n
4	210	40	+
5	270	260	+
6	220	170	-

Candidates 1 and 5 have an integrative score associated with leaving but a (+, -,n) score associated with staying. Candidates 2 and 3 have integrative and (+,-,n) scores associated with staying, but assertive scores lower than any stayer we have assessed so far. Candidate 6 has an integrative score associated with staying but a (+, -,n) score which includes a high level of introaggression.

Candidate 4's score correlates most strongly with staying. He left the Community after 2 years' work at a point when his work with individual boys had reached a natural conclusion.

These are the scores for the 3 candidates who are presently working at the Community and are in their 3rd year.

<u>Candidate Assertive score Integrative score +-n</u>			
1	190	130	+
2	380	240	+
3	460	470	+

Acknowledgements

Grateful thanks are extended to John Whitwell, Principal of the Cotswold Community, for his support and encouragement, to Eric Miller for his helpful comments about the structure and content of this paper, to Michael Norris for kindly commenting on the paper and providing a statistical analysis of the data, to Doug Flower who helpfully provided a further statistical analysis and to all the applicants and staff who participated in the assessment process.

References

- Bettelheim, B. (1974) *Home for the Heart*, Thames and Hudson, London
- Dockar Drysdale, B. (1990) *The Provision of Primary Experience: Winnicottian Work with Children and Adolescents*, Free Association Books
- Dockar Drysdale, B. (1993) *Therapy and Consultation Child Care*, Free Association Books, London
- Freud, S. (1926) *Inhibitions, Symptoms and Anxiety. Standard Edition, Vol. XX*. Hogarth Press
- Khaleelee, O. (1994) The Defence Mechanism Test as an Aid for Selection and Development of Staff, in, *International Journal of Therapeutic Communities*, Volume 1, 5, No. 1, 3-13
<https://www.johnwhitwell.co.uk/material-from-the-work-of-the-cotswold-community/the-defence-mechanism-test/>
- Khaleelee, O. and Woolf, R. (1996) Personality, Life Experience and Leadership Capability, in, *Leadership and Organization Development Journal*, 17/6 5-11
- Kragh, U. (1955) *The Actual-Genetic Model of Perception-Personality: An Experimental Study with Non-Clinical and Clinical Groups*, Lund, Sweden: University of Lund, Thesis
- Kragh, U. (1962) Prediction of success of Danish attack divers by the Defence Mechanism Test (DMT), in, *Perceptual and Motor Skills*, 103-106
- Laplanche, J. and Pontalis, J-B (1973) *The Language of Psychoanalysis*, The Hogarth Press and The Institute of Psycho-Analysis
- Miller, E.J. (1989) Towards an Organizational Model for Residential Treatment of Adolescents, Prepared as a chapter (to be translated into Italian) for: *Comunita' residenziali per adolescenti difficili*, edited by Cesare Kaneklin and Achille Orsenigo, Roma: Nuova Italia Scientifica,
<https://www.johnwhitwell.co.uk/material-from-the-work-of-the-cotswold-community/towards-an-organizational-model-for-residential-treatment-of-adolescents/>
- Neuman, T. (1971) Perceptual Defence Organisation as a Predictor of the Pilot's Adaptive Behaviour in Military Flying, in, Anderson, J.D. (ed.) *Reports of the 9th Conference for Aviation Psychology*, September 21 -24, Cambridge, U.K.
- Olf, M., Godaert, G., Ursin, H. (eds) (1991) *Quantification of Human Defence Mechanisms*, Springer-Verlag
- Saitner, B.E. (1991) Application of the DMT for Assessing Serious Drinking and Driving Offenders, in, Olf, M. Godaert, G., Ursin, H. (Eds.) *Quantification of Human Defence Mechanisms*, Springer-Verlag

Siegel, D. (1956) *Nonparametric Statistics for the Behavioural Sciences*, McGraw Hill

Svensson, B. and Trygg. L. (1991) *Personality characteristics of Candidates for Air Traffic Controller Training*, University of Lund

Torjussen, T. and Vaernes, R. (1991) The Use of the Defence Mechanism Test (DMT) in Norway for Selection and Stress Research, in, Olff, M., Godaert, G. and Ursin, H. (eds) *Quantification of Human Defence Mechanisms*, Springer-Verlag

Vaernes, R.J. (1982) The Defence Mechanism Test Predicts Inadequate Performance Under Stress, University of Bergen, Norway, in, *Scandinavian Journal of Psychology*, 23, 37-43

Winnicott, D. (1956) Primary Maternal Preoccupation, in, *Through Paediatrics to Psychoanalysis*, The Hogarth Press and the Institute of Psycho-Analysis, London, 1978